2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002383

Entity Name: LINCOLN 845 LLC

Current Principal Place of Business:

275 MADISON AVE SUITE 1100

C/O JENEL MANAGEMENT CORP

NEW YORK, NY 10016

Current Mailing Address:

C/O JENEL MANAGEMENT CORP 275 MADISON AVE SUITE 1100 NEW YORK, NY 10016 US

FEI Number: 22-3616443 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOINELO, CRISTINA C/O CBA REALTY & MANAGEMENT CORP. 1948 HARRISON ST., STE. 101 HOLLYWOOD, FL 33020 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: S/ CRISTINA MOINELO 01/06/2019

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title Title **MGRM** MGRM

Name 845 LINCOLN MANAGING MEMBER Name DUSHEY, DAVID

CORPORATION Address 1020 PARK AVE, 15A

C/O JENEL MANAGEMENT CORP.275 Address

City-State-Zip: NEW YORK NY 10028 MADISON AVE. SUITE 1100

NEW YORK NY 10016 City-State-Zip: **MGRM** Title

Title **MGRM** Name DUSHEY, SAMMY

HIRSCHHORN, MICHAEL Name Address 944 PARK AVE #12

Address 30 FAIR LANE City-State-Zip: NEW YORK NY 10028

City-State-Zip: JERICHO NY 11753 Title **MGRM**

Title Name HAMWAY, EZRA MGRM

Name DUSHEY, ABRAHAM Address C/O PARKWAY MANAGEMENT, 275

MADISON AVE., STE. 1100 C/O SW GROUP LLC, 9 EAST 40TH ST,

Address NEW YORK NY 10016 City-State-Zip:

MEZZANINE NEW YORK NY 10016 City-State-Zip:

Title **MGRM**

BOTSARIS, PETER Name Title **MGRM** Name MAHANA, ALAN Address 7 KNOLLS LANE

1912 E. 5TH STREET City-State-Zip: MANHASSET NY 11030 Address

City-State-Zip: **BROOKLYN NY 11223**

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID DUSHEY **MGRM** 01/06/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jan 06, 2019

Secretary of State

2579091561CC

Authorized Person(s) Detail Continued:

Title MGRM Title MGRM

Name AUG, JAMES Name SAMUEL DUSHEY 2011 TRUST

Address C/O JED DALLEK, GETTRY MARCUS CPA PC Address C/O JENEL MANAGEMENT CORP. 275

88 FROEHLICH FARM BLVD, 3RD FL MADISON AVE., STE. 1100

City-State-Zip: WOODBURY NY 11797 City-State-Zip: NEW YORK NY 10016

Title MGRM Title MGRM

Name RHONDA JEMAL 2011 TRUST Name DAVID DUSHEY 2011 TRUST

Address C/O JENEL MANAGEMENT CORP. 275 MADISON Address C/O JENEL MANAGEMENT CORP. 275

AVE., STE. 1100 MADISON AVE., STE. 1100

City-State-Zip: NEW YORK NY 10016 City-State-Zip: NEW YORK NY 10016